



# CITY OF GEARHART

698 PACIFIC WAY • P.O. BOX 2510 • GEARHART, OREGON 97138  
(503) 738-5501 • (503) FAX 738-9385

## APPLICATION FOR CITY OCCUPATIONAL LICENSE

In accordance with the provisions of ordinance No. 394, adopted 9/2/1970, the undersigned hereby makes application for a City License and submits the following information: (PLEASE PRINT)

NAME OF APPLICANT: \_\_\_\_\_  
MIDDLE LAST FIRST

BUSINESS NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

BUSINESS PHONE NUMBER: \_\_\_\_\_

LOCATION OF GEARHART OFFICE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

If a partnership, give names and address of several partners. If a corporation, give name of President and Secretary, and address of home office and name and address of local agent of representative:

Description of business, shop, profession, trade or occupation: \_\_\_\_\_

CONTRACTOR REGISTRATION NUMBER: \_\_\_\_\_ Exp date: \_\_\_\_\_

The City requires that each licensee and each applicant for issuance or renewal of a license shall file or have on file with the City a signed statement that the licensee or applicant is registered under the provisions of ORS 701.055 and the registration is in full force and effect. The signing of this application for an occupational license will serve as certification of registration as required by ORS 701.055.

Amount of License Fee submitted: \_\_\_\_\_. BE IT KNOWN TO THE APPLICANT THAT THIS APPLICATION IS SUBJECT TO APPROVAL BY THE CITY OF GEARHART.

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

\_\_\_\_\_  
CITY ADMINISTRATOR